07-06-05

## PART B - FEE(S) TRANSMITTAL

	or <u>r</u>				P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000	
.INSTRUCTIONS: This appropriate. All further condicated unless controlled maintenance fee notified.	form should be used for transorrespondence including the below of directed otherwise	nsmitting the ISSU Patent, advance or in Block 1, by (a		PUBLICATION FEE (if req ification of maintenance fees a new correspondence addres	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  27572 7590 04/26/2005				papers. Each addition	f mailing can only be used for his certificate cannot be used a lal paper, such as an assignment to of mailing or transmission.	for any other accompanying
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7/08/2005 TBESHAH2 000	000005 10/89911				Hilly, Esq.	(Depositor's name)
1 FC:1501 2 FC:1504			N. Hill	HUU	(Signature)	
3 FC:8001	300.00 OP 18.00 OP			July 5, 2005		(Date)
APPLICATION NO.	FILING DATE	T	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/789,911 02/27/2004		Tim Roland		4041A-000011	8911	
APPLN. TYPE	PASSENGER FOOT DUCT  SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nchprovisional	NO NO	\$1400		\$300	\$1700	07/26/2005
<u> </u>					31,000	011202003
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"Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AN PLEASE NOTE: Unler recordation as set forth  (A) NAME OF ASSIGNAME	in 37 CFR 3.11. Completion NEE	ation form the of a Customer  BE PRINTED ON The the low, no assignee of this form is NO'  (E)	(2) the na registered 2 registered listed, no THE PATEN data will app T a substitute	pear on the patent. If an assig for filing an assignment. CE: (CITY and STATE OR CO	a member a 2 2 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Pierce, PLC
Please check the appropria		ories (will not be pr	inted on the p	oatent): 🔲 Individual 💥 (		oup entity Governmen
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  All Issue Fee  All A check in the amount of the fee(s) is enclosed.						
Payment by credit card. Form PTO-2038 is attached.						
XX Advance Order - #	of Copies0 6	<del></del>	The Direction Deposit Acc	ector is hereby authorized by count Number 8-0750	charge the required fee(s), or (enclose an extra c	credit any overpayment, to
a. Applicant claims	s (from status indicated above SMALL ENTITY status. See	e) 37 CFR 1.27.	☐ b. Applie	cant is no longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).
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Authorized Signature _				Date	July 5, 2005	
Typed or printed name	H. Keith	Miller, E	sq.	Registratio	July 5, 2065 n No. 22,484	
Alexandria, Virginia 22313	5-1430.			to obtain or retain a benefit by llection is estimated to take 12 pon the individual case. Any on nation Officer, U.S. Patent and D FORMS TO THIS ADDRES		